



Annual Provider Training 2020 Iowa Total Care Question and Answers

This document is a collection of answers to questions received in the chat during the IME's Annual Provider Training session held in November of 2020. Iowa Total Care has provided answers to questions directed towards their team. The questions as asked are preserved in black text, and Iowa Total Care's answers are provided in blue text.

- 1) From Dorothy Thorne : I have a few ITC claims where they are not paying the Medicaid rate when the private insurance is actually less than the Medicaid rate. ITC is paying up to the primary's contracted rate. Am I correct that these claims should still pay up to the Medicaid rate regardless of the private insurance contracted rate?
 - a. Iowa Total Care should be paying up to the Medicaid rate. If you are seeing claims that are paying below the Medicaid rate please reach out to your Provider Relations rep to initiate a review.
- 2) From Carrie VS : @abottom - I just emailed the Provider Support email as well as ITC Regions email to request supporting documentation for all the prepayments, but no one has responded. The reps by phone don't seem to know what I'm asking for.
 - a. The [Provider Relations Territory Map](#) shows all of the Provider Relations Specialists by region along with the Provider Relations Leadership team. Please reach out to your Provider Relations rep and/or the management team if you are unable to get resolution with the call center.
- 3) From Kim Smith : Does IME have a liaison who we can reach out to with all the issues we have with Iowa Total Care??
 - a. Maria James (mjames@dhs.state.ia.us) is the IME MCO Liaison.
- 4) From Marcy Rahn : ITC over paid our T code by almost \$200 a unit for months, causing claims to over pay by up to 3k... now they are under paying the same t code...Will the rates ever be correct in the ITC system?
 - a. Iowa Total Care will continue to update rates as concerns are identified. Projects are completed to reprocess affected claims. Please contact your Provider Relations rep with any rate concerns.
- 5) From sbreasure - WCPHNS : My provider rep is very helpful at ITC she has even reached out to the claims department and has gotten report on denials and under payments for the 2019 claims. Just to let everyone know the same denial codes are back in play and I was told they are in projects once again
 - a. Iowa Total Care will continue to update rates as concerns are identified. Projects are completed to reprocess affected claims. Please contact your Provider Relations rep with any rate concerns.
- 6) From tanderson : ITC- continue to pay claims at nonsense and incorrect rates. Why would ITC pay \$874 on a claim that is \$225??? Incorrect rate payments have been going on since 7.1.19. We have submitted so many corrected claims time after time. This is very time consuming and takes a lot of manpower to get paid.
 - a. Iowa Total Care will continue to update rates as concerns are identified. Projects are completed to reprocess affected claims. Please contact your Provider Relations rep with any rate concerns.
- 7) From jendavis : Is ITC looking at extending the 30 days. Unfortunately large entities don't get mail same date, it is usually behind by at least 10 days and date sent

- a. There are no plans at this time to change the 30 day timeline. These can be reviewed on an individual basis. Please reach out to your Provider Relations rep.
- 8) From agnesh : ITC why are you not using the standard denial reasons instead of xX ys L6 bt etc
- a. A crosswalk to standard denial reasons is available to providers please reach out to your Provider Relations rep.
- 9) From sbreasure - WCPHNS : Anyone else have trouble getting anyone when they call ITC's 833 number? I seem to get a message that no one is available a lot and it just hangs up. I would think they would have a better forwarding system with everyone working at home now.
- a. This issue has been resolved.
- 10) From Kim Smith : ITC denials aren't standard and then are so vague that you don't have any idea what the problem is and customer service doesn't help. I try to reach out to our provider rep which is another new one and no reply back. From Vicki : Negative balance recoupments from ITC off an EFT should include the claims that are being adjusted. The information from the finance department at ITC never matches what has been listed as an overpayment.
- a. Iowa Total Care is in the process of developing an enhancement regarding payment summary and negative balances on provider EOPs. There will be a Provider Alert regarding this enhancement. The new features will allow providers to better view when negative balances are applied or offset from claims payment on the current EOP. The new functionality will not apply to previous EOPs.
- 11) From tanderson : ITC- does psychological testing require prior authorization? Been told yes and no!
- a. Using codes 96130-96133 prior authorization is required. If you have another code please contact your Provider Relations rep to check.
- 12) From Aneasha Verdoorn : How should we be billing 0202U and 0241U? We have received notification 0241U is not on ITC's fee schedule... Will this be added? Do we need to bill alternative codes?
- a. 0241U is on Iowa Total Care's fee schedule.
- 13) From Sue Miller : My providers receive all ITC remits thru PaySpan, it is worth the time to set up and register for that portal, as you get both paying and zero pay remits.
- a. Iowa Total Care is in the process of developing an enhancement regarding payment summary and negative balances on provider EOPs. There will be a Provider Alert regarding this enhancement. The new features will allow providers to better view when negative balances are applied or offset from claims payment on the current EOP. The new functionality will not apply to previous EOPs.
- 14) From tanderson : ITC portal- some claims i pull up state ITC received the claim on 4/16/20 and they are still unpaid. Are these claims stuck in la la land or why have they not been processed yet? Amerigroup- I have a bunch of claims received 9/23/20 and they are still pending processing as well.
- a. Iowa Total Care has been working through pends and holds the last few months. Please contact your Provider Relations rep if you are still seeing claims pending for an extended period of time.
- 15) From MCRHC : Does ITC has a list of their open projects like Amerigroup has?
- a. From Kelly Acevedo : ITC Configuration Log
<https://www.iowatotalcare.com/content/dam/centene/iowa-total-care/PDF/ITC%20System%20Configuration%20Issues%20Projects%2011.13.20.pdf>
- 16) From cfedericks : ITC keeps denying 87426 for NDC code is invalid, missing or inappropriate. This is a lab charge. Is ITC aware of this problem? This CPT needs to stop denying for this reason please.

- a. Iowa Total Care implemented a fix for this issue in January. There will be a project to reprocess affected claims.
- 17) From Patty Fraise : Why does ITC not accept documentation attached to original claim when sent through a clearing house. Such a waste of our time to have to wait for the denial to send a reconsideration and attach documentation when we know you want it.
- a. Documentation can be attached to the claim via the Portal.
- 18) From Sherri Hopper : Iowa Total Care when will the new 2020 CPT codes be paid that have been added to the Medicaid fee schedule months ago. For example G2066.
- a. The 2020 CPT codes on the Medicaid fee schedule have been loaded.
- 19) From Michelle O'Meara : Our ERA's for the last week have been crazy. It appears ITC is just randomly reprocessing claims from 2019. Is there something happening with the claims processing?
- a. Over the last few months we have had many projects closing. There were claims that were part of multiple projects which resulted in some claims reprocessing multiple times.
- 20) From katelynnparmer : The Ca Aa denial was brought to my regions Provider Rep in August, and unfortunately we still have not seen any of these corrected. Told it was due to ITC Pricing System and to hold all Reconsideration Requests for these incorrect denials. When a Reconsideration is sent, they rarely get approved and no explanation as to why the decision was made is visible.
- a. This issue has been resolved. Please reach out to your Provider Relations rep if you are still experiencing claims denying for this reason.
- 21) From HartmanJody : Is ITC's system ready to accept GEMT additional payments on ambulance claims?
- a. Yes, Iowa Total Care is accepting claims with the A0999 code for the GEMT additional payment.
- 22) From Mindy Oxenford : We are having issues with reimbursement regarding use of the 59 modifier with the NCCI edits. We have been told by both ITC and Amerigroup that it is a problem but have noticed that it is not on the list of known system configuration issues to be fixed and we continue to see denials. Is anyone else having this problem? MCO's--how can we efficiently get this fixed? yes, it is an issue, we have many bundling denials for 59 and X modifiers for therapy claims
- a. This issue is being researched with our corporate partners as more information becomes available we will update providers.
- 23) From Kwagoner : Does MCO Iowa Total care grant retro Auth's
- a. Iowa Total Care does grant retro authorizations with documentation provided. The requests must be faxed not submitted through the Portal and "retro-eligibility" written on the request.
- 24) From Bobbie Wulf, Washington and Louisa County CDS : If someone is on an HCBS Waiting List but is a Medicaid recipient what case management service within the MCO is utilized to coordinate any other services that the member may need?
- a. Iowa Total Care has a waitlist team that can manage most of the cases. Some we may refer to Care Management. Some we can case manage through LTSS as Developmental Disability if they qualify.
- 25) From Kristine : We have 59 and XS (which one should we be using for Iowa Total Care and Amerigroup?) issues with GI procedures.
- a. This issue is being researched with our corporate partners as more information becomes available we will update providers.

- 26) From dloug : When will ITC's portal information be correct - finding that several claim have incorrect information and keep being told by the ITC Rep that they are aware of the issue and that it is being worked on.
- a. Iowa Total Care has weekly meetings with our Portal team to work through errors and provide suggestions for enhancements.
- 27) From Genesis Medical Center : how do we submit medical records if ITC does not accept paper claims?
- a. Documentation can be attached via the Portal. If you have received a denial you can submit documentation with a reconsideration request.
- 28) From dloug : We have been told by our ITC Rep not to send reconsiderations on the claims that are not being paid at the correct rate for T1015s. So what are we supposed to do about these claims.
- a. These claims were part of a project. If you still have claims paying at the incorrect rate please reach out to your Provider Relations rep.
- 29) From Alyssa Luckstead : How can we get approval letters from authorizations submitted on ITC's website?
- a. Hard copy letters are mailed for all authorizations.
- 30) From Jodi : What is the best way to submit a claim when IA Medicaid/Amerigroup/Iowa Total care is the tertiary coverage? Need to be able to submit multiple eobs.
- a. Per the Iowa Total Care Provider Billing Manual: Tertiary medical claims must be billed on paper claim forms and both the primary and secondary EOBs must be attached. Paper submissions should be mailed to: Iowa Total Care, Attn: Claims Department, PO Box 8030, Farmington MO 63640.
- 31) From Roxanne.Wolverton : Does ITC have all there issues corrected? We still have a lot of 2019 claims not paid. We were told you all are going to reprocess the ALL claims. but that is not happening.
- a. Please refer to the [Configuration Log](#) for information on issues/projects. We have processed many project in the last several months. If you are still seeing an issue that was part of a project please reach out to your Provider Relations rep.
- 32) From Jodi : In regards to the tertiary submission - the Medicaid and mco's do not accept paper - want to know the best processing steps to get the tertiary claim and eobs to a Medicaid processor to have adjudicated.
- a. Per the Iowa Total Care Provider Billing Manual: Tertiary medical claims must be billed on paper claim forms and both the primary and secondary EOBs must be attached. Paper submissions should be mailed to: Iowa Total Care, Attn: Claims Department, PO Box 8030, Farmington MO 63640.
- 33) From Tracie's iPad : I was told from IA Total Care, submit paper claims with primary and secondary EOBs with a narrative in box 19 ... is this correct.
- a. Per the Iowa Total Care Provider Billing Manual: Tertiary medical claims must be billed on paper claim forms and both the primary and secondary EOBs must be attached. Paper submissions should be mailed to: Iowa Total Care, Attn: Claims Department, PO Box 8030, Farmington MO 63640.
- 34) From Alyssa Luckstead : Where can we obtained redeterminations letters after they are upheld or resolved from ITC? We have never seen one and if we have 30 days after resolution to appeal.
- a. If the reconsideration has been upheld or determined to be paid you will receive that determination on your remit. If you are needing additional information or you still do not agree

you can file an appeal or reach out to your PR Rep to help find you more information. The appeal process is set up to send out letter of determination to providers.

35) From Karen Watson : Iowa Total Care Reconsideration response would be great to hear about. I saw other people post questions on that too. We submit reconsiderations but never receive letters about the outcome.

- a. If the reconsideration has been upheld or determined to be paid you will receive that determination on your remit. If you are needing additional information or you still do not agree you can file an appeal or reach out to your PR Rep to help find you more information. The appeal process is set up to send out letter of determination to providers.

36) From tkastli : Karen Watson go on website to see if they are even there? They may have VOIDED them tkastli@clarkpo.com I asked about VOIDED CLAIMS Is there an answer about that with IA Total Care.

- a. Please reach out to your Provider Relations rep for more information about voided claims.

37) From Alyssa Luckstead : Kelly when the remit for a reconsideration determination has the same denial or no clarification and customer service does not know why the denial was upheld how should we proceed with appealing the claim? 11:43:46 From tkastli : Traci Kastli Agree with Alyssa 11:44:03 From HysaMY : ITC question: after we send the recon, we do not get EOP. we simply just see the reconsideration completed with no information of the outcome. From Jennifer Pavlovec : ITC, I would rather receive letters about the outcome of reconsiderations, rather than letters noting my reconsideration was received. Please consider that for the future. 11:44:29 From tsommers : YES to the above! 11:45:00 From Gail Cameron : For Total Care, how do you match up a \$0 EOP, which actually shows a recoupment to a future EOP where the recoupment is actually being taken back? 11:45:06 From Renae : Agreed with Jennifer! Didn't need all the letters letting me know it was received when I can see that in the website when I submitted it! What a WASTE of printing and mailing.

- a. If the reconsideration has been upheld or determined to be paid you will receive that determination on your remit. If you are needing additional information or you still do not agree you can file an appeal or reach out to your PR Rep to help find you more information. The appeal process is set up to send out letter of determination to providers.

38) From Alyssa Luckstead : Will customer service for ITC ever have the information regarding reconsiderations and reasoning? Customer service stated they do not have access to reconsiderations on the website.

- a. If the reconsideration has been upheld or determined to be paid you will receive that determination on your remit. If you are needing additional information or you still do not agree you can file an appeal or reach out to your PR Rep to help find you more information. The appeal process is set up to send out letter of determination to providers.

39) ITC: Is Iowa Total Care also using CAQH for credentialing?

- a. Yes, but it is not required the Universal Practitioner application can be used.

40) AGP/ITC: Can a better policy be implemented for the on-going issue of presumptive eligibility and claims denied by the MCO's for no notification/authorization because coverage was made retroactive with an MCO after the discharge date?

- a. Iowa Total Care does grant retro authorizations with documentation provided. The requests must be faxed not submitted through the Portal and "retro-eligibility" written on the request.

41) AGP/ITC: We experience the same issues with retro-auth requests as Monique...many times our clients (Residential Treatment Facility) come in with inactive or no Medicaid status, due to a court ordered

placement. Both MCO's seem to not understand that this is happening on a regular basis and that the provider does not have any control. We are required to provide the services (that do NOT require a pre-auth by IME) but struggle to get back-dated auths for those services (BHIS),

- a. Iowa Total Care does grant retro authorizations with documentation provided. The requests must be faxed not submitted through the Portal and "retro-eligibility" written on the request.

42) ITC: Can you please provide information on the ITC timelines for rate changes in the LTSS services. Specifically for ICF/ID settings. As well as procedures for back adjustments for claims that are paid incorrectly due to rates not being adjusted in a timely manner. These rates change as a minimum of yearly in July, but rates in many of our facilities that should have gone up remain paying at the lower rates which ended in June.

- a. Rates are typically updated within 30 days and a project will occur within the next 30 days to adjust claims incorrectly paid. If it does take longer rates will be retroactively updated and a project will occur to adjust affected claims.

43) ITC: When will we be able to use online claims tool with Iowa Total Care to send an online claims appeal?

- a. This functionality will be available for future but we have no ETA at this time.

44) ITC : You can upload medical records to ITC but the size of what they except is extremely small so it is next to impossible to get the medical records to them.We use xs/59 on multiple procedures all the time and with medicare, and we NEVER have to send notes to lift the edits as that shows that we are doing multiple procedures in one day. why do we need to send notes for you guys to lift the edits when we do the exact same thing with medicare and don't have to send them notes????

- a. This issue is being researched with our corporate partners as more information becomes available we will update providers.

45) ITC??? The last information we received (from Linda Farrell) on the ACE denials (modifier 59) was that these claims would be reprocessed so they will reflect the more appropriate denial reason. Should we be sending these in for reconsideration ???

- a. A project will be coming for these denials. Please see the [System Configuration Log](#) for more details.

46) – AGP/ITC When we can't obtain clarification and our provider reps do not respond will the 30 day timely filing for appeals be waived?

- a. We would need more information to determine if the 30 day timeline can be waived. If you are having difficulties reaching your Provider Relations rep please reach out to the Provider Relations leadership listed on the [Provider Relations Territory Map](#).

b.

47) How do we determine who our provider rep is since were out of state.

- a. Please refer to the [Provider Relations Territory Map](#) page two has the information for the out of state provider rep.